

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	VT	69407	2/11/00
O.I.P.E. CLASSIFIER	R		2/26/00
FORMALITY REVIEW		69407	
RESPONSE FORMALITY REVIEW			B-2310

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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